Recipient Committee Campaign Statement (Government Code Sections 84200-84216.5)	Type or print in in	nk.	Date Stamp	CA	ALIFORNIA 2001/02 FORM
	Statement covers period from 02/15/2020	Date of election if applicable: (Month, Day, Year)		Pa	ge 1 of 28  For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through 06/30/2020	11/03/2020			
1. Type of Recipient Committee: All Committee	ees - Complete Parts 1,2,3, and 4.	2. Type of Stateme	ent:		
<ul> <li>■ Officeholder, Candidate Controlled Committee         <ul> <li>State Candidate Election Committee</li> <li>Recall</li> </ul> </li> <li>(Also Complete Part 5.)</li> <li>□ General Purpose Committee</li> <li>Sponsored</li> <li>Small Contributor Committee</li> <li>Political Party/Central Committee</li> </ul>	Ballot Measure Committee Primary Formed Controlled Sponsored (Also Complete Part 6.) Primary Formed Candidate/ Officeholder Committee (Also Complete Part 7.)	☐ Pre-election Stater ☐ Semi-annual Stater ☐ Termination Stater ☐ Amendment (Expla	ement ment	Spec Supp	terly Statement ial Odd-Year Report lemental Preelection ment - Attach Form 495
3. Committee Information	I.D.NUMBER 1418916	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE LEE FOR STATE ASSEMBLY 2020; ALEX	1110910	NAME OF TREASURER Jason Zamorano			
STREET ADDRESS (NO P.O. BOX)		MAILING ADDRESS			
CITY STATE ZIP COD SAN JOSE CA 95133	PE AREA CODE/PHONE (408)981-1581	CITY Milpitas	STATE CA	ZIP CODE 95035	AREA CODE/PHONE 4087261560
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BC	DX	NAME OF ASSISTANT TREASU	KEK, IF AINT		
CITY STATE ZIP COD	DE AREA CODE/PHONE	MAILING ADDRESS			
OPTIONAL: FAX/E-MAIL ADDRESS		CITY	STATE	ZIP CODE	AREA CODE/PHONE
ca.alex.lee@gmail.com		OPTIONAL: FAX/E-MAIL ADDRE mrjasonzamorano@gmail.com	SS		
Executed on By		ornia that the foregoing is true at assistant treasurer  E MEASURE PROPONENT OR RESPONSIBL	e officer of sponsor	ein and in the	
Executed on By	SIGNATURE OF CONTROLLING OFFICEHOLDER	, CANDIDATE, STATE MEASURE PROPONEN	NT	FPPC Toll-Fr	FPPC Form 460 (June/01) ree Helpline: 866/ASK-FPPC State of California

COVER PA	AGE - PART 2
CALIFORNIA FORM	460

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Page		OT _	

NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF BALLOT MEASURE				
Alex Lee								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS State Assembly Person Assembly District	TRICT NUMBER	IF APPLICABLE	25	BALLOT NO. OR LETTER	JURISDICTION	N		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP	Identify the controlling office	eholder, candi	date, or state	measure prop	onent, if any.
San	Jose	CA 95	5133	NAME OF OFFICEHOLDER, CAN	DIDATE, OR PR	OPONENT		
Related Committees Not Included in this not included in this statement that are controlled by you or contributions or to make expenditures on behalf of your care.	r are primarily fo			OFFICE SOUGHT OR HELD			DISTRICT NO. II	FANY
COMMITTEE NAME	I.D.NUMB	BER		7. Primarily Formed C		List names o	of officeholder(s	) or candidate(s) Ffo
NAME OF TREASURER	CONTRO	LLED COMMITT	EE?	NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)	<b>'</b>			NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT
CITY STATE	ZIP CODE	AREA COD	E/PHONE					OPPOSE
COMMITTEE NAME	I.D.NUMB	BER		NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTRO	LLED COMMITT	EE?	NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)	I							

Recipient Committee Campaign Statement Cover Page - Part 2

### Recipient Committee Campaign Statement Cover Page - Part 2

CALIFORNIA FORM	460
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Page  $\frac{3}{}$  of  $\frac{28}{}$ 

Officeholder or Candidate Controlled	Committee	6. Ballot Measure Co	ommittee			
NAME OF OFFICEHOLDER OR CANDIDATE	_	NAME OF BALLOT MEASURE				
Alex Lee						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT State Assembly Person Assembly District	NUMBER IF APPLICABLE) 25	BALLOT NO. OR LETTER	JURISDICTIO	N		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	TY STATE ZIP	Identify the controlling off	iceholder, candi	idate, or state m	easure propo	onent, if any.
San Jose	CA 95133	NAME OF OFFICEHOLDER, C.	ANDIDATE, OR PR	OPONENT		
Related Committees Not Included in this State not included in this statement that are controlled by you or are prontributions or to make expenditures on behalf of your candidate.	orimarily formed to receive	OFFICE SOUGHT OR HELD		D	ISTRICT NO. IF	ANY
COMMITTEE NAME	I.D.NUMBER	7. Primarily Formed which this committee is prima	arily formed.			or candidate(s) Ff
NAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OF	R CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)		NAME OF OFFICEHOLDER OF	R CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT
CITY STATE ZIP C	ODE AREA CODE/PHONE					OPPOSE
COMMITTEE NAME	I.D.NUMBER	NAME OF OFFICEHOLDER OF	R CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OF	R CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)						
CITY STATE ZIP C	ODE AREA CODE/PHONE	Atta	ch continuation	sheets if necess	sary	

# **Campaign Disclosure Statement Summary Page**

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from 02/15/2020 CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LEE FOR STATE ASSEMBLY 2020; ALEX

through 06/30/2020 Page 4 of 28

I.D. NUMBER
1418916

Contributions Received	Column A  TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE		Both the State	or Candidates Primary and
Monetary Contributions Schedule A, Line 3	\$82,381.40	\$83,625.40	General Lie	Clions	
2. Loans Received Schedule B, Line 7	\$0.00	\$0.00		1/1 through 6/30	7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$82,381.40	\$83,625.40	20. Contribution Received	\$83,640.40	\$0.00
4. Nonmonetary Contributions Schedule C, Line 3	\$15.00	\$15.00	04.5		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$82,396.40	\$83,640.40	21. Expenditures Made	\$17,270.13	\$0.00
Expenditures Made			Expenditure	Limit Summa	ary for State
6. Payments Made Schedule E, Line 4	\$9,207.46	\$17,127.66	Candidates		
7. Loans Made Schedule H, Line 7	\$0.00	\$0.00	22. Cu	mulative Exper	nditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$9,207.46	\$17,127.66	(If Sul	bject to Voluntary E	xpenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	\$0.00	\$0.00	Date of Ele		Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	\$15.00	\$15.00	(mm/dd	l/yy)	
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$9,222.46	\$17,270.13	3/3/2020	\$32,6	522.89
Current Cash Statement			_11/3/2020	_\$4,02	23.99
12. Beginning Cash Balance Previous Summary Page, Line 16	\$4,620.47	To calculate Column B, add amounts in Column A to the			
13. Cash Receipts Column A, Line 3 above	\$82,381.40	corresponding amounts			
14. Miscellaneous Increases to Cash Schedule I, Line 4	\$756.79	from Column B of your last report. Some amounts in			
15. Cash Payments Column A, Line 8 above	\$9,207.46	Column A may be negative			
16. <b>ENDING CASH BALANCE</b> Add Lines 12 + 13 + 14, then subtract Line 15	\$78,551.20	figures that should be subtracted from previous			
If this is a termination statement, Line 16 must be zero.		period amounts. If this is the first report being filed			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$0.00	for this calendar year, only carry over the amounts			
Cash Equivalents and Outstanding Debts		from Lines 2, 7, and 9 (if any).	*Since January	1, 2001. Amounts	in this section may b
18. Cash Equivalents See instructions on reverse	\$0.00	-	umerent nom af	nounts reported in	Column D.
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$0.00	-	FPF		Form 460 (June/01 line: 866/ASK-FPP0

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#### Schedule A Monetary Contributions Received

Type or print in ink. Amounts may be rounded

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Monetary Contributions Received			nts may be rounded whole dollars.	Statement cov from	20	FORM	
SEE INSTRUCTIO	DNS ON REVERSE			through06/30/202	20	Page	_5 of28
NAME OF FILER LEE FOR STATE	E ASSEMBLY 2020; ALEX					I.D. N 14189	umber 16
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)
3/5/2020	Michael Melillo San Jose, CA 95118-1431	IND COM OTH PTY SCC	Apple Analyst	\$200.00	\$200.00		2020G: \$200.00
4/11/2020	Spencer Katz San Diego, CA 92119	IND COM OTH PTY SCC	Terra Lawson-Remer for SD County Supervisor 2020 Campaign Manager	\$100.00	\$100.00		2020G: \$100.00
4/29/2020	Daniel Vainish San Francisco, CA 94115	IND COM OTH PTY SCC	California State Senate Office Manager	\$180.00	\$180.00		2020G: \$180.00
5/12/2020	Weston Miliken Los Angeles, CA 90069	IND COM OTH PTY SCC	Self Employed Consultant	\$1,000.00	\$1,000.00		2020G: \$1,000.00
5/28/2020	Jesus Garcia Los Angeles, CA 90039	IND COM OTH PTY SCC	SEIU 721 Research Analyst	\$100.00	\$150.00		2020G: \$100.00
			SUBTOTA	L			
Schedule A	A Summary				*(	Contributo	r Codes
	ceived this period - contributions of \$100 or more.  I Schedule A subtotals.)			\$77,361.00	II	ND - Indiv OM - Red	idual ipient Committee
2. Amount red	ceived this period - unitemized contributions of less	s than \$100		\$5,020.40		TH - Othe	
3. Total mone	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, C			\$82,381.40		TY - Politi CC - Sma	cal Party Il Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary C	FOR STATE ASSEMBLY 2020; ALEX		whole dollars.	Statement cov from02/15/202	·	CALIFORNIA 460		
SEE INSTRUCTION:	S ON REVERSE			through06/30/202	20	Page	6 of 28	
NAME OF FILER LEE FOR STATE A	ASSEMBLY 2020; ALEX					I.D. N 14189		
DATE	FULL NAME, MAILING ADDRESS	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS	CUMULATIVE T	-	PER ELECTION TO DATE	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2020	Martin Manteca Temple City, CA 91781	IND COM OTH PTY SCC	SEIU Union Organizer	\$100.00	\$100.00	2020G: \$100.00
5/29/2020	Michael Toulouse San Jose, CA 95128	IND COM OTH PTY SCC	Dell, Inc. Engineer	\$100.00	\$100.00	2020G: \$100.00
5/31/2020	Eamon Jahani Fremont,, CA 94539	IND COM OTH PTY SCC	None None	\$150.00	\$250.00	2020G: \$150.00
5/31/2020	Zachary Rosen San Francisco, CA 94127	IND COM OTH PTY SCC	Pantheon CEO	\$500.00	\$500.00	2020G: \$500.00
6/2/2020	Lauren Carden San Jose, CA 95112	IND COM OTH PTY SCC	Law Foundation of Silicon Valley Attorney	\$100.00	\$100.00	2020G: \$100.00

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\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received	to whole dollars.			Statement covers period			CALIFORNIA 460		
·		from	02/15/2020	)	F	ORM	400		
SEE INSTRUCTIONS ON REVERSE		through	06/30/2020	)	Page	<u>7</u> o	of 28		
NAME OF FILER LEE FOR STATE ASSEMBLY 2020; ALEX					I.D. N 14189				
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
6/3/2020	Emma Humphries San Jose, CA 95112	IND COM OTH PTY SCC	Mozilla Corporation Program Manager	\$100.00	\$100.00	2020G: \$100.00		
6/4/2020	Brenna Savage San Jose, CA 95112	IND COM OTH PTY SCC	Good Samaritan Hospital ICU Nurse	\$100.00	\$100.00	2020G: \$100.00		
6/7/2020	Eric Chung Santa Clara, CA 95054	IND COM OTH PTY SCC	Trion Worlds Software Engineer	\$300.00	\$375.00	2020G: \$375.00		
6/8/2020	Alexander Kindel Mountain View, CA 94043	IND COM OTH PTY SCC	Google Software Engineer	\$100.00	\$100.00	2020G: \$100.00		
6/8/2020	Steven Ellenberg San Jose, CA 95126	IND COM OTH PTY SCC	Hopkins & Carley Attorney	\$500.00	\$500.00	2020G: \$500.00		
	SUBTOTAL							

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OTH - Other

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SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			o whole dollars.	Statement cover from 02/15/2020	•	CALIFORNIA 460 FORM		
SEE INSTRUCTION	NS ON REVERSE			through06/30/2020	)	Page	_8 of _28	
NAME OF FILER LEE FOR STATE A	ASSEMBLY 2020; ALEX					I.D. N 14189	lumber 16	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
6/15/2020	David Donaldson Santa Clara, CA 95051	IND COM OTH PTY	None Retired	\$500.00	\$500.00		2020G: \$500.00	
6/17/2020	Marque Snow Omaha, NE 68131	IND COM	Holland Children's Movement & Institute	\$100.00	\$100.00		2020G: \$100.00	

			SUBTOTAL	_		
6/19/2020	Philip Boyer San Jose, CA 95125-4434	IND COM OTH PTY SCC	IBM Software engineer	\$100.00	\$100.00	2020G: \$100.00
6/19/2020	Jacey Beaucage San Jose, CA 95123	IND COM OTH PTY SCC	Western Digital Corporation Engineer	\$100.00	\$100.00	2020G: \$100.00
6/18/2020	Elise Nicolas San Jose, CA 95132	IND COM OTH PTY SCC	Law Firm Marketing	\$100.00	\$100.00	2020G: \$100.00
	Omaha, NE 68131	COM OTH PTY SCC	Institute Senior Advisor / Development			

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IND - Individual

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SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received	to whole dollars.			Statement covers period			CALIFORNIA 460		
•			from	02/15/2020	)	F	ORM	400	7
EEE INSTRUCTIONS ON REVERSE			through	06/30/2020	)	Page	9	of 28	-
NAME OF FILER						I.D. N	umber		
EE FOR STATE ASSEMBLY 2020; ALEX						14189	16		

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/19/2020	Mark Newhouse San Jose, CA 95110	IND COM OTH PTY SCC	self Poker Player	\$100.00	\$100.00	2020G: \$100.00
6/19/2020	Sheila Wang Orinda, CA 94564	IND COM OTH PTY SCC	Wells Fargo Project Manager	\$100.00	\$100.00	2020G: \$100.00
6/20/2020	David Huang Newark, CA 94560	IND COM OTH PTY SCC	Lord's Grace Christian Church Pastor	\$100.00	\$100.00	2020G: \$100.00
6/21/2020	James Rizzo San Francisco, CA 94110	IND COM OTH PTY SCC	Lyft Product Manager	\$150.00	\$150.00	2020P: \$75.00 2020G: \$150.00
6/23/2020	Hrishikesh Sathawane Fremont, CA 94539	IND COM OTH PTY SCC	Western Digital Marketing	\$100.00	\$100.00	2020G: \$100.00

#### **SUBTOTAL**

\*Contributor Codes

IND - Individual

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OTH - Other

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SCC - Small Contributor Committee

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Amounts may be rounded

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Statement covers period

Monetary Contributions Received		to	whole dollars.	from02/15/2020		FORM 46U	
SEE INSTRUCTION	NS ON REVERSE			through06/30/2020	0	Page	
NAME OF FILER LEE FOR STATE	ASSEMBLY 2020; ALEX					I.D. N 14189	lumber 116
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
6/23/2020	Charles Sheets Santa Clara, CA 95054-3567	IND COM OTH PTY SCC	Apple Inc. UX Product Manager	\$100.00	\$200.00		2020P: \$100.00 2020G: \$100.00
6/24/2020	Izys Ramos Santa Clara, CA 95051	IND COM OTH PTY SCC	Zscaler University Recruiter	\$100.00	\$100.00		2020G: \$100.00
6/26/2020	Chih-Kuan Wang Fremont, CA 94536	IND COM OTH PTY	Nvidia Software Engineer	\$100.00	\$100.00		2020G: \$100.00

Tesla Motors

None

None

Software Engineer

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<b>SUB1</b>	OTAL
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\$500.00

\$100.00

\$500.00

\$100.00

\*Contributor Codes

IND - Individual

6/26/2020

6/28/2020

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Lisa Danz

Vivian Doan

Fremont, CA 94538

Milpitas, CA 95035

FPPC Form 460 (JUNE/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

2020G: \$500.00

2020G: \$100.00

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Amounts may be rounded

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Monetary Contributions Received		to whole dollars.		from 02/15/2020	•	CALIFORNIA 460		
SEE INSTRUCTION	NS ON REVERSE			through06/30/2020	)	Page	_11 <b>of</b> 28	
NAME OF FILER LEE FOR STATE ASSEMBLY 2020; ALEX					I.D. N 14189	lumber 16		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
6/28/2020	Tiffany Pham Milpitas, CA 95035	■ COM	The RealReal Luxury product authenticatorLuxury product	\$100.00	\$100.00		2020G: \$100.00	

RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	PERIOD	(JAN. 1 - DEC. 31)	(IF REQUIRED)
6/28/2020	Tiffany Pham Milpitas, CA 95035	IND COM OTH PTY SCC	The RealReal Luxury product authenticatorLuxury product authenticator	\$100.00	\$100.00	2020G: \$100.00
6/29/2020	Simon Dominic Lucido San Jose, CA 95131	IND COM OTH PTY SCC	Stanford Healthcare Center Supply Chain	\$100.00	\$100.00	2020G: \$100.00
6/29/2020	Tri Tran Milpitas, CA 95035	IND COM OTH PTY SCC	Gen Korean BBQ Server	\$200.00	\$200.00	2020G: \$200.00 2020P: \$60.66
6/30/2020	Vipan Bajwa Union City, CA 94587	IND COM OTH PTY SCC	Ernst & Young LLP Consultant	\$100.00	\$100.00	2020G: \$100.00
6/30/2020	Fung Lee Milpitas, CA 95035	IND COM OTH PTY SCC	None Retired	\$100.00	\$100.00	2020P: \$4,700.00 2020G: \$100.00

#### **SUBTOTAL**

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Amounts may be rounded

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Monetary Contributions Received	to whole dollars.			Statement covers period			460
•		from	02/15/2020	0	F	ORM	400
EEE INSTRUCTIONS ON REVERSE		through	06/30/2020	0	Page	12	of_28
NAME OF FILER EE FOR STATE ASSEMBLY 2020; ALEX					I.D. N 14189	lumber 16	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/30/2020	Tammy Nguyen Milpitas, C 95035	IND COM OTH PTY SCC	Preset Sourcer	\$100.00	\$100.00	2020P: \$20.20 2020G: \$100.00
6/30/2020	John Pfenning San Jose, CA 95111	IND COM OTH PTY SCC	None None	\$100.00	\$100.00	2020G: \$100.00
6/30/2020	James Pistole San Jose, CA 95126	IND COM OTH PTY SCC	Advanced Micro Devices Engineer	\$100.00	\$100.00	2020G: \$100.00
6/30/2020	Zachary Castillo-Krings Sacramento, CA 95816	IND COM OTH PTY SCC	California State Senate Policy Consultant	\$250.00	\$250.00	2020G: \$250.00
6/30/2020	Yogesh Chugh FREMONT, CA 94539	IND COM OTH PTY SCC	Self-Employed Consultant	\$200.00	\$200.00	2020G: \$200.00

#### **SUBTOTAL**

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received		to	to whole dollars.		ers period	CALIFORNIA 460		
SEE INSTRUCTION	IS ON REVERSE			through06/30/202	0	Page	of28	•
NAME OF FILER LEE FOR STATE A	ASSEMBLY 2020; ALEX					I.D. No 14189		•
DATE	FULL NAME, MAILING ADDRESS	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO	DATE	PER ELECTION	•

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/30/2020	Christopher Cook San Jose, CA 95127	IND COM OTH PTY SCC	None None	\$200.00	\$200.00	2020G: \$200.00 2020P: \$100.00
6/30/2020	Barbara Grasseschi Healdsburg, CA 95448	IND COM OTH PTY SCC	Puma Springs Vineyards Farmer	\$1,000.00	\$1,000.00	2020G: \$1,000.00
6/30/2020	Karen Grove Menlo Park, CA 94025	IND COM OTH PTY SCC	None None	\$4,700.00	\$4,700.00	2020G: \$4,700.00
2/20/2020	Teresa Keng for Fremont City Council District 1 Fremont, CA 94555 Committee ID: 1427243	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$100.00	\$100.00	2020P: \$100.00
3/6/2020	Natsha Gupta San Jose, CA 95110	IND COM OTH PTY SCC	ServiceNow Technology Manager	\$100.00	\$100.00	2020G: \$100.00

#### **SUBTOTAL**

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

SCHEDI	II 🗆 🗡	(CONT

Monetary Contributions Received		to	to whole dollars.		from02/15/2020			california 460		
SEE INSTRUCTION	IS ON REVERSE			through	n_06/30/2020	0	Page	14 of_	<u> 28</u>	
NAME OF FILER LEE FOR STATE A	ASSEMBLY 2020; ALEX						I.D. N 14189	Number 916		
	ELILL NAME MAILING ADDRESS		IF AN INDIVIDUAL ENTER	AMC	OUNT	CUMULATIVE T	O DATE	PER ELE	FCTION	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/4/2020	Daniel Roberts Newark, CA 94560	IND COM OTH PTY SCC	None Retired	\$99.00	\$198.00	2020P: \$99.00 2020G: \$99.00
5/25/2020	Stern for Senate 2020 Sacramento, CA 95815 Committee ID: 1392385	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$4,700.00	\$4,700.00	2020G: \$4,700.00
6/12/2020	Consumer Attorneys Political Action Committee Sacramento, CA 95814 Committee ID: 760231	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$4,700.00	\$4,700.00	2020G: \$4,700.00
6/30/2020	Stephen Chessin Mountain View, CA 94040	IND COM OTH PTY SCC	Oracle Software engineer OracleSoftware engineer	\$100.00	\$100.00	2020G: \$100.00
6/30/2020	Margaret Okuzumi Sunnyvale, CA 94087	IND COM OTH PTY SCC	None None	\$200.00	\$200.00	2020G: \$200.00

#### **SUBTOTAL**

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received		to	to whole dollars.		from02/15/2020			CALIFORNIA 460		
SEE INSTRUCTION	IS ON REVERSE			through	06/30/2020	)	Page		28	
NAME OF FILER LEE FOR STATE A	ASSEMBLY 2020; ALEX						I.D. N 14189	Number 916		
	ELILI NAME MAILING ADDDESS		IF AN INDIVIDUAL ENTER	AMC	DUNT	CUMULATIVE T	O DATE	PER FLE	=CTION	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/30/2020	Huy Tran San Jose, CA 95132	IND COM OTH PTY SCC	Justice at Work Law Group, LLP	\$200.00	\$200.00	2020P: \$200.00 2020G: \$200.00
2/16/2020	Michelle Hua San Jose, CA 95133	IND COM OTH PTY SCC	None Student	\$100.00	\$100.00	2020P: \$100.00
6/30/2020	Lance Kwan Fremont, CA 94555	IND COM OTH PTY SCC	Spectrum Community Services Weatherization Scheduler	\$128.00	\$128.00	2020G: \$128.00
4/2/2020	Lacy Wright Los Angeles, CA 90029	IND COM OTH PTY SCC	Social Impact Consultant	\$300.00	\$300.00	2020G: \$300.00
4/20/2020	Alfred Twu Berkeley, CA 94704	IND COM OTH PTY SCC	MWA Architects / Self Employed Architect/ Artist	\$54.00	\$554.00	2020G: \$54.00

#### **SUBTOTAL**

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

SCHEDI	II 🗆 🗡	(CONT

Monetary Contributions Received	to whole dollars.	Statement covers period	CALIFORNIA 460
•		from02/15/2020	FORM TOO
SEE INSTRUCTIONS ON REVERSE		through06/30/2020	Page <u>16</u> of <u>28</u>
NAME OF FILER			I.D. Number
EE FOR STATE ASSEMBLY 2020; ALEX			1418916
			<del>'</del>

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/3/2020	Alex Lee San Jose, CA 95133	IND COM OTH PTY SCC	none	\$500.00	\$500.00	2020P: \$500.00
6/30/2020	California Medical Association Political Action Committee Sacramento, CA 95814 Committee ID: 742617	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$2,500.00	\$2,500.00	2020G: \$2,500.00
6/30/2020	Cement Mason's Local 400 Political Action Committee Sacramento, CA 95834 Committee ID: 1223458	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$250.00	\$250.00	2020G: \$250.00
6/30/2020	SEIU CALIFORNIA STATE COUNCIL SMALL CONTRIBUTOR COMMITTEE Sacramento, CA 95814 Committee ID: 831628	☐ IND ☐ COM ☐ OTH ☐ PTY ■ SCC		\$9,300.00	\$9,300.00	2020G: \$9,300.00
6/30/2020	PROFESSIONAL ENGINEERS IN CALIFORNIA GOVERNMENT PAC Sacramento, CA 95814 Committee ID: 822501	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$9,300.00	\$9,300.00	2020G: \$9,300.00

#### **SUBTOTAL**

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received	whole dollars.	Statement covers period from 02/15/2020		CALIFORNIA 46				
SEE INSTRUCTIONS ON REVERSE		through	n_06/30/2020	)	Page	_17	of_28	_
NAME OF FILER LEE FOR STATE ASSEMBLY 2020; ALEX					I.D. N 14189	lumber 916		

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/11/2020	California Federation of Teachers COPE Small Contributor Committee Burbank, CA 91505 Committee ID: 741857	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$5,000.00	\$5,000.00	2020G: \$5,000.00
6/27/2020	FACULTY ASSOCIATION, SAN JOSE/EVERGREEN CC DISTRICT, COMMITTEE ON POLITICAL EDUCATION (COPE) San Jose, CA 95128-2723 Committee ID: 1255568	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2020G: \$1,000.00
6/24/2020	SPRINKLER FITTERS & APPRENTICES LOCAL 483 LEGISLATIVE PAC Hayward, CA 94545 Committee ID: 990058	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$2,500.00	\$2,500.00	2020G: \$2,500.00
6/27/2020	California Professional Firefighters Political Action Committee Sacramento, CA 95833 Committee ID: 744058	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$2,500.00	\$2,500.00	2020G: \$2,500.00
6/21/2020	UNITED FOOD AND COMMERCIAL WORKERS WESTERN STATES COUNCIL CANDIDATES PAC Buena Park, CA 90620 Committee ID: 910874	☐ IND ☐ COM ☐ OTH ☐ PTY ■ SCC		\$2,500.00	\$2,500.00	2020G: \$2,500.00

#### **SUBTOTAL**

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

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Statement covers period

Monetary Contributions Received		to	o whole dollars.	from02/15/2020		FORM 46U	
SEE INSTRUCTION	ONS ON REVERSE			through06/30/202	20	Page	of 28
NAME OF FILER LEE FOR STATE	ASSEMBLY 2020; ALEX			1		I.D. N 14189	Number 916
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
6/15/2020	SHEET METAL WORKERS LOCAL UNION 104 POLITICAL COMMITTEE San Ramon, CA 94583 Committee ID: 850381	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$4,700.00	\$4,700.00		2020G: \$4,700.00
6/15/2020	Sheet Metal Workers 104 District 2, Small Contributor Committee San Ramon, CA 94583 Committee ID: 882292	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$4,600.00	\$4,600.00		2020G: \$4,600.00
5/8/2020	PACE of California School Employees Association - Local, State, Federal Candidates; A Multi-Candidate Committee Sacramento, CA 95814 Committee ID: 1325942	☐ IND ☐ COM ☐ OTH ☐ PTY ■ SCC		\$4,000.00	\$4,000.00		2020G: \$4,000.00
5/18/2020	IBEW 332 EDUCATION FUND (SPONSORED BY INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL 332) SMALL CONTRIBUTOR COMMITTEE San Jose, CA 95125 Committee ID: 1298069	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$4,700.00	\$4,700.00		2020G: \$4,700.00
		☐ IND ☐ COM					

☐ OTH ☐ PTY ☐ SCC

**SUBTOTAL** \$77,361.00

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

#### Schedule B – Part 1 Loans Received

Type or print in ink.

Amounts may be rounded to whole dollars.

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Statement covers period	CALIFORNIA 460	ļ
om02/15/2020	FORM 40L	J

SCHEDULE B - PART 1

fro 06/30/2020 Page <u>19</u> \_ of 28through SEE INSTRUCTIONS ON REVERSE LD NUMBER NAME OF FILER LEE FOR STATE ASSEMBLY 2020; ALEX 1418916 (a) OUTSTANDING (d) OUTSTANDING IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE **AMOUNT** AMOÙNT PAID INTÈREST ORIĞİNAL CUMÜLATIVE OCCUPATION AND EMPLOYER BALANCE RECEIVED OR FORGIVEN BALANCE AT PAID THIS AMOUNT OF CONTRIBUTIONS OF LENDER (IF SELF-EMPLOYED, ENTER BEGINNING THIS THIS PERIOD THIS PERIOD\* **CLOSE OF THIS** PERIOD LOAN TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) NAME OF BUSINESS) PERIOD PERIOD Alex Lee CALENDAR YEAR Legislative Staff PAID San Jose, CA 95133 CA State Assembly \$5,400.00 \$4,900.00 \$4,900.00 PER ELECTION\*\* 2020P: \$5,400.00 RATE FORGIVEN \$4,900.00 6/4/2019 ■ IND □ COM □ OTH □ PTY □ SCC DATE DUE DATE INCURRED **CALENDAR YEAR** PAID RATE PER ELECTION\*\* FORGIVEN □IND □COM□OTH□PTY□SCC DATE DUE DATE INCURRED PAID **CALENDAR YEAR** RATE PER ELECTION\*\* FORGIVEN □IND □COM□OTH□PTY□SCC DATE DUE DATE INCURRED **SUBTOTALS** \$4,900.00 **Schedule B Summary** (Enter (e) on Schedule E, Line 3) \$0.00 1. Loans received this period. (Total Column (b) plus unitemized loans less than \$100.) \$0.00 \* Amounts forgiven or paid by another party also must be reported on Schedule A. 2. Loans paid or forgiven this period (Total Column (c) plus loans under \$100 paid or forgiven.) (Include loans paid by a third party that are also itemized on Schedule A.) \$0.00 3. Net change this period. (Subtract Line 2 from Line 1.) Net \*\* If required. Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number) \*Contributor Codes

PTY-Political Party

SCC-Small Contributor Committee

OTH-Other

2490900

**IND-Individual** 

COM-Recipient Committee (other than PTY or SCC)

#### Schedule B - Part 2 Loan Guarantors

### Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE B - PART 2
Statement covers period	CALIFORNIA 160
from <u>02/15/2020</u>	FORM TOO
through <u>06/30/2020</u>	Page 20 of 28
	16.11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
LEE FOR STATE ASSEMBLY 2020; ALEX

I.D. Number 1418916

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
			LENDER		CALENDAR YEAR	
	☐ COM ☐ OTH ☐ PTY ☐ SCC		DATE		PER ELECTION (IF REQUIRED)	
	☐ IND ☐ COM		LENDER		CALENDAR YEAR	
□ 0 <sup>-</sup>   □ P1	OTH PTY SCC	TH TY	DATE		PER ELECTION (IF REQUIRED)	
					-	
	☐ IND ☐ COM		LENDER		CALENDAR YEAR	
☐ OTH ☐ PTY ☐ SCC	☐ OTH ☐ PTY		DATE		PER ELECTION (IF REQUIRED)	
	☐ IND ☐ COM		LENDER		CALENDAR YEAR	
□ COM □ OTH □ PTY □ SCC		DATE		PER ELECTION (IF REQUIRED)		
			SUBTOTAL		Enter on Summary Page, Line 17 only.	
					Line 17 only.	

#### Schedule C Type or print in ink. Amounts may be rounded SCHEDULE C **Nonmonetary Contributions Received** Statement covers period **CALIFORNIA** to whole dollars. **FORM** Page <u>21</u> of 28through $\frac{06/30/2020}{}$ SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. Number 1418916 LEE FOR STATE ASSEMBLY 2020; ALEX **CUMULATIVE TO** IF AN INDIVIDUAL, ENTER AMOUNT/ PER ELECTION FULL NAME, STREET ADDRESS AND CONTRIBUTOR **DESCRIPTION OF** DATE DATE OCCUPATION AND EMPLOYER FAIR MARKET TO DATE CODE \* GOODS OR SERVICES CALENDAR YEAR ZIP CODE OF CONTRIBUTOR **RECEIVED** (IF SELF-EMPLOYED, ENTER VALUE (IF REQUIRED) (JAN 1 - DEC 31) (IF COMMITTEE, ALSO ENTER I.D. NUMBER) NAME OF BUSINESS) СОМ □ отн PTY $\square$ scc □сом □отн ☐ PTY scc □ сом □отн

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

PTY SCC

☐ IND ☐ COM ☐ OTH

#### **Schedule C Summary**

<ol> <li>Amount received this period - nonmonetary contributions of \$100 or more.</li> </ol>	*Contributor Codes
(Include all Schedule C subtotals.)	IND - Individual
2. Amount received this period - unitemized nonmonetary contributions of less than \$100	COM- Recipient Committee (other than PTY or SCC) OTH - Other
3. Total nonmonetary contributions received this period.  (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	PTY - Political Party SCC - Small Contributor Committee

#### Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.

Amounts may be rounded to whole dollars.

Stat	ement covers period	CALIFORNIA	160
from	02/15/2020	FORM	400
through	06/30/2020	Page <u>22</u>	of <u>28</u>

SCHEDULE D

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
LEE FOR STATE ASSEMBLY 2020; ALEX

through 06/30/2020 Page 22 of 28

I.D. NUMBER
1418916

NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR **DESCRIPTION** AMOUNT THIS **CUMULATIVE TO DATE** PER ELECTION DATE TYPE OF PAYMENT MEASURE NUMBER OR LETTER AND JURISDICTION, (IF REQUIRED) **PERIOD** CALENDAR YEAR TO DATE (JAN.1 - DEC. 31) (IF REQUIRED) OR COMMITTEE 6/24/2020 Jake Tonkel for Tonkel for San Jose City Council District 6 2020 \$600.00 \$600.00 Monetary Contribution City Council District 6 Jurisdiction: San Jose Nonmonetary Contribution Independent Expenditure Support Oppose 6/24/2020 Amodei & Crader for Hayward City Council 2020 \$1,000.00 \$1,000.00 Monetary Contribution City Council Jurisdiction: Hayward Nonmonetary Contribution Independent Expenditure Support Oppose Monetary Contribution Nonmonetary Contribution Independent Expenditure Support Oppose **SUBTOTAL** \$1,600.00

#### **Schedule D Summary**

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$1,600.00
2. Unitemized contributions and independent expenditures made this period of under \$100	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	\$1,600.00

#### Schedule E Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 160
from02/15/2020	FORM 400
through <u>06/30/2020</u>	Page $\underline{^{23}}$ of $\underline{^{28}}$
	I.D. NUMBER 1418916

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LEE FOR STATE ASSEMBLY 2020; ALEX

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)
	NAME AND ADDRESS OF PAYEE				

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OF	R	DESCRIPTION OF PAYMENT	AMOUNT PAID
San Jose, CA 95128	СТВ				\$600.00
Amodei & Crader for Hayward City Council 2020 #1420107 Hayward, CA 94544	СТВ				\$1,000.00
Facebook Menlo Park, CA 94025	WEB				\$5,044.07

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

#### **SUBTOTAL**

#### **Schedule E Summary**

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$9,170.64
2. Unitemized payments made this period of under \$100.	\$36.82
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A. Line 6.)	\$9,207.46

#### Schedule E (Continuation Sheet) Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from02/15/2020	FORM 400
through <u>06/30/2020</u>	Page $\frac{24}{}$ of $\frac{28}{}$
	I.D. NUMBER

1418916

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LEE FOR STATE ASSEMBLY 2020; ALEX

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE O	R DESCRIPTION OF PAYMENT	AMOUNT PAID
USPS Washington, DC 20260	POS		\$1,630.00
1455 Market Street Weebly.com San Francisco, CA 94103	WEB		\$163.95
ActBlue Somerville, MA 02144-0031	PRO	transaction fees	\$732.62

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL** \$9,170.64

#### Schedule F **Accrued Expenses (Unpaid Bills)**

Type or print in ink. Amounts may be rounded

Staten	nent covers period	CALIFORNIA 46		
from	02/15/2020	FORM	400	
through	06/30/2020	Page 25	of 28	

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER LEE FOR STATE ASSEMBLY 2020; ALEX 1418916 **CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants RFD returned contributions MTG meetings and appearances CTB contribution (explain nonmonetary)\* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, email) PRT print ads (d) (b) NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR OUTSTANDING AMOUNT INCURRED AMOUNT PAID OUTSTANDING **DESCRIPTION OF PAYMENT** BALANCE BEGINNING THIS PERIOD THIS PERIOD BALANCE AT CLOSE OF THIS PERIOD OF THIS PERIOD (ALSO REPORT ON E) \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTALS** Schedule F Summary 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.).....

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

May be a negative number.

#### Schedule G Payments Made by an Agent or Independent **Contractor (on Behalf of This Committee)**

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE G		
Statement covers period	CALIFORNIA A CO		
from <u>02/15/2020</u>	FORM 40U		
through _06/30/2020	Page <u>26</u> of <u>28</u>		
	I.D. NUMBER 1418916		

NAME OF AGENT OR INDEPENDENT CONTRACTOR

SEE INSTRUCTIONS ON REVERSE

LEE FOR STATE ASSEMBLY 2020; ALEX

NAME OF FILER

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)\* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor VOT voter registration LEG legal defense PRO professional services (legal, accounting) campaign literature and mailings PRT print ads WEB information technology costs (internet, email)

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

Attach additional information on appropriately labeled continuation sheets.

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TOTAL\*

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Sched	ule H –	
Loans	Made to	Others*

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	SCHEDULE H
1	CALIFORNIA A CO

Loans Made to Others*		Amounts may be rounded to whole dollars.		from <u>02/15/2020</u>		CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE					through <u>06/30/20</u>	020	Page <u>27</u>	of 28
NAME OF FILER LEE FOR STATE ASSEMBLY 2020; ALEX							I.D. NUMBER 1418916	
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				PAID				CALENDAR YEAR
				FORGIVEN		RATE %		PER ELECTION**
					DATE DUE		DATE INCURRED	
				PAID				CALENDAR YEAR
				FORGIVEN		RATE %		PER ELECTION**
					DATE DUE		DATE INCURRED	-
Loans that are contributions to another candidate must also be summarized on Schedule D. Loans talso be reported on Schedule E.	forgiven must	SUBTOTALS						
				<u> </u>	1	(Enter (e) on Schedule I, Line 3)		
Schedule H Summary							_	
Loans made this period  Total Column (b) plus unitemized loans	less than \$100.)							** If Required
Payments received on loans  Total Column (c) plus unitemized paym	nents less than \$100.)							
3. Net change this period. (Subtract Line Enter the net here and on the Summary	e 2 from Line 1.)y Page, Column A, Line 7.)				NET (May be a ne	gative number)		

### Schedule I

Type or print in ink.

		SCHEDULE I
Statement covers period		CALIFORNIA A CO
from _	02/15/2020	CALIFORNIA 460

Miscellan	eous increases to Cash	to whole dollars.	from02/15/2020	CALIFORNIA 460
SEE INSTRUCTIO	INS ON REVERSE		through	_ Page 28 of 28
NAME OF FILER LEE FOR STATE	I.D. NUMBER 1418916			
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	SCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
4/17/2020	Santa Clara County Registrar of Voters San Jose, CA 95161-1360	Refund on Candidate S	Statement Fee	\$756.79
Attach ac	dditional information on appropriately labeled continuation	n sheets.	SUBTO	TAL\$756.79
	I Summary			
1. Increases	to cash of \$100 or more this period		<u>\$756.79</u>	
2. Unitemized	d increases to cash under \$100 this period		<u>\$0.00</u>	
3. Total of all	interest received this period on loans made to others. (S	Schedule H, Column (e))	\$0.00	

4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the

Summary Page, Line 14.)....

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TOTAL \$756.79